

## POTENTIALLY HARMFUL DIETARY SUPPLEMENTS (411L, 425I, 427A)

PARTICIPANT TYPE.....	ALL
HIGH RISK.....	NO

### RISK DESCRIPTION:

Dietary supplements, which when fed in excess of recommended dosage, may be toxic or have harmful consequences. Examples include:

- Single or multi-vitamins
- Mineral supplements
- Herbal or botanical supplements, remedies and teas

### ASK ABOUT:

- Length of time using the supplement and amount taken per day
- Reason for use, i.e., instead of or in addition to conventional treatment, prevention or to treat an existing health condition
- Potential for nutrient interactions, toxicity and teratogenicity
- Participant's need for selective vitamin and/or mineral supplementation
- Family and cultural practices affecting supplement use
- Medical history including medical conditions and illnesses and treatment plans (examples include relieving common discomforts of pregnancy such as morning sickness, nausea, vomiting, and heartburn; increasing a breastfeeding mother's milk supply; and treating colic or gastrointestinal problems in infants and children)
- Knowledge and attitudes about dietary supplements

### NUTRITION COUNSELING/EDUCATION TOPICS:

- Reinforce the positive things about the participant's eating pattern.
- Discuss strategies for improving nutrient density of diet instead of taking a vitamin and/or mineral supplement.
- Review strategies for dealing with common discomforts of pregnancy affecting diet or gastrointestinal problems in infants and children.
- Pregnant women and breastfeeding women are at higher risk for adverse effects from dietary supplements because of the possibility of transferring the harmful substance to their infants.

## **NUTRITION COUNSELING/EDUCATION TOPICS (CON'T):**

- Vitamins and Minerals:
  - Most nutrient toxicities occur through excessive supplementation of vitamins A, B6, and niacin; iron and selenium. Large doses of vitamin A may be teratogenic in pregnancy.
  - Over-the-counter vitamin and mineral supplements are not regulated.
  - Reinforce intake of vitamin and mineral supplements at less than 100% of DRI for the participant's lifecycle stage.
  - If a physician prescribed the vitamin or mineral supplement, verify the dosage and how to measure it.
- Herbal or Botanical Supplements and Remedies:
  - Herbal preparations are not regulated. Many factors affect the safety of botanical supplements including the part of the plant used, where it was grown, and how it was prepared. Without regulation, consumers do not have information to help them evaluate a product's safety. Because of this lack of regulation and so few studies implicating safe use in WIC's target population, WIC does not endorse their use.
  - Herbal and botanical preparations have chemical and biological activity so they may cause side effects (including allergy) and may interact with certain medications. These interactions can cause problems and even be dangerous. Safety depends on how it works in the body, how the individual metabolizes it, and the dose.
  - Examples of herbal supplements with potentially harmful effects in pregnancy and breastfeeding include blue cohosh and pennyroyal.
  - If parent/participant continues to use the supplement, advise to be alert for any unusual symptoms and to report them to their primary care provider immediately.
- Herbal Teas:
  - While some herbal teas may be safe, others have undesirable effects.
  - Examples with potentially harmful effects for infants and children include licorice, comfrey leaves, sassafras, senna, buckhorn bark, cinnamon, wormwood, woodruff, valerian, foxglove, pokeroor or pokeweed, periwinkle, nutmeg, catnip, hydrangea, juniper, Mormon tea, thorn apple, yohimbe bark, lobelia, oleander, Maté, kola nut or gotu cola, and chamomile.
  - Pregnant women should use caution with herbal tea mixtures due to lack of safety testing. Recommend filtered teabags from nationally recognized manufacturers instead of loose pack tea leaves. Advise to limit intake to two 8-ounce servings per day to avoid displacing more nutrient-dense beverages.

## **POSSIBLE REFERRALS:**

- Refer to primary care provider to discuss use of any supplement.
- If the participant does not have an ongoing source of health care, refer to primary care providers in the community or the local public health department.